

JOYLAND TRAINING COLLEGE

STUDENT APPLICATION FORM NTA LEVEL 1

Lamadi – Busega – Simiyu, Tanzania

SECTION A: PERSONAL INFORMATION

1. **Full Name:** _____
2. **Date of Birth:** _____
3. **Sex:** Male Female
4. **Nationality:** _____
5. **National ID / NIDA (if available):** _____
6. **Birth Certificate No.:** _____
7. **Telephone:** _____
8. **Email Address (optional):** _____
9. **Permanent Address:**
 - Village/Street: _____
 - Ward: _____
 - District: _____
 - Region: _____

SECTION B: COURSE APPLIED FOR

Tick (✓) the course you wish to join:

(Choose one)

Long Courses (NTA Levels 1 – 3):

- Information & Communication Technology (ICT)
- Information Technology (IT)
- Tailoring, Embroidery & Fashion Design
- Other (Specify): _____

Short Courses:

- Secretariat & Computer Applications
- Computer Repair & Maintenance
- Mechanics & Driving Course
- Tailoring Basics
- Electrical Installation Basics
- Other (Specify): _____

Preferred Intake:

- January April July September

SECTION C: EDUCATION BACKGROUND

Level of Education	School Name	Completion Year	Grade / Division
Primary Education			
O-Level			
A-Level (if applicable)			
Vocational/Other			

Upload/Attach Photocopies of:

- Birth Certificate
- Academic Certificates
- Recent Passport-size Photo (2)
- NIDA ID / NIDA Copy (if available)

SECTION D: PARENT / GUARDIAN INFORMATION

1. **Full Name:** _____
2. **Relationship to Applicant:** Parent Guardian Sponsor
3. **Phone Number:** _____
4. **Occupation:** _____
5. **Address:** _____

SECTION E: NEXT OF KIN (If different from guardian)

1. **Full Name:** _____
2. **Relationship:** _____
3. **Phone Number:** _____
4. **Address:** _____

SECTION F: MEDICAL INFORMATION

1. **Do you have any chronic illnesses?**
 Yes No
If yes, specify: _____
2. **Any physical disability?**
 Yes No
If yes, specify: _____
3. **Blood Group (if known):** _____

SECTION G: SPONSORSHIP INFORMATION

Who will pay your tuition fees?

- Self
- Parent/Guardian

- Sponsor (Organization/Individual)
- Government / NGO (Specify): _____

SECTION H: DECLARATION BY APPLICANT

I, _____, hereby declare that the information provided in this form is true and correct to the best of my knowledge. I understand that giving false information may result in the cancellation of my admission.

Signature of Applicant: _____ **Date:** _____

SECTION I: OFFICIAL USE ONLY (FOR COLLEGE ADMINISTRATION)

Item	Verified	Remarks
Birth Certificate	<input type="checkbox"/> Yes	
Academic Certificates	<input type="checkbox"/> Yes	
Passport Photos	<input type="checkbox"/> Yes	
Payments	<input type="checkbox"/> Registration Fee Paid	
Interview	<input type="checkbox"/> Passed <input type="checkbox"/> Rejected	

Admission Status:

- Admitted Not Admitted

Course Admitted To: _____

Level (NTA 1/2/3): _____

Registrar/Admission Officer: _____

Signature: _____ **Date:** _____